

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION			
O.I.P.E. CLASSIFIER		8	03/28/01
FORMALITY REVIEW	SS	TCM	03/16/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 • Allowed I Interference
 - (Through number) Canceled A Appeal
 + Restricted O Objected

Claim	Date
1	13/01/01
2	13/01/01
3	13/01/01
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
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BEST AVAILABLE COPY